•	FILED 21.24			
	OB HAY 29 PH 2: 24			
1	OB LIM, MIEL CONMIN			
2	CLERK W. S. T. FILES			
3				
4	E-ming			
5				
6				
7				
8	UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA			
9				
10	Cy 08 2259			
11	Sam Dorte Gray Plaintiff, CASE NO.			
12 13	vs. PRISONER'S APPLICATION TO PROCEED IN FORMA PAUPERIS			
14	J.L.WAIKER (WARDON) Defendant.			
15				
16	I, San Dotte Cora, declare, under penalty of perjury that I am the			
17	plaintiff in the above entitled case and that the information I offer throughout this application			
18	is true and correct. I offer this application in support of my request to proceed without being			
19	required to prepay the full amount of fees, costs or give security. I state that because of my			
20	poverty I am unable to pay the costs of this action or give security, and that I believe that I an			
21	entitled to relief.			
22	In support of this application, I provide the following information:			
23	1. Are you presently employed? Yes No \$\frac{1}{2}\$			
24	If your answer is "yes," state both your gross and net salary or wages per month, and give the			
5	name and address of your employer:			
6	Gross: Net:			
7	Employer:			
8				

1	If the answ	er is "no," state the date of last employme	ent and the amount of	the gross and net		
2	2 salary and wages per month which you received. (If you are imprisoned, specify the last					
3	place of employment prior to imprisonment.)					
4	Thurstin					
5		,				
. 6			·. ·			
7	2. Hav	e you received, within the past twelve (12	2) months, any money	from any of the		
8	following s	ources:		•		
9	a.,	Business, Profession or	Yes No	4		
10		self employment				
11	b.	Income from stocks, oonds,	Yes No _	\checkmark		
12		or royalties?				
13	c.	Rent payments?	Yes No _	$\sqrt{}$		
14	√ d.	Pensions, annuities, or	Yes No_	<u> </u>		
15		life insurance payments?	Yes No _\			
16	e.	Federal or State welfare payments,	Yes No _	<u>/</u>		
17		Social Security or other govern-				
18		ment source?		•		
19	If the answe	r is "yes" to any of the above, describe ear	ch source of money an	d state the amoun		
20	received from	m each.				
21						
22			· · · · · · · · · · · · · · · · · · ·			
23	3. Are y	you married?	Yes No 📐	_		
24	Spouse's Full Name:					
25	Spouse's Place of Employment:					
26	Spouse's Monthly Salary, Wages or Income:					
27	Gross \$	Net \$		· 		
28	4. a.	List amount you contribute to your spo	ouse's support:\$			

1	b. List the persons other than your spouse who are dependent upon you for					
2	support and indicate how much you contribute toward their support. (NOTE:					
3	For minor children, list only their initials and ages. DO NOT INCLUDE					
4	THEIR NAMES.).					
5						
6						
. 7	5. Do you own or are you buying a horne? Yes No					
8	Estimated Market Value: \$ Amount of Mortgage: \$					
9	6. Do you own an automobile? Yes No					
10	Make Year Model					
11	Is it financed? Yes No If so, Total due: \$					
12	Monthly Payment: \$					
13	7. Do you have a bank account? Yes No (Do not include account numbers.)					
14	Name(s) and address(es) of bank:					
15						
16	Present balance(s): \$					
17	Do you own any cash? Yes No Amount: \$					
18	Do you have any other assets? (If "yes," provide a description of each asset and its estimated					
19	market value.) Yes No					
20						
21	8. What are your monthly expenses?					
22	Rent: \$ Utilities:					
23	Food: \$ Clothing:					
24	Charge Accounts:					
25	Name of Account Monthly Payment Total Owed on This Acct.					
26	\$\$ <u> </u>					
27	\$ \$ \$					
28						

1	9. Do you have any other debts? (List current obligations, indicating amounts and to					
2	whom they are payable. Do <u>not</u> include account numbers.)					
3	RESTITUTION/TO WHOM ONKNOWN					
4						
5	10. Does the complaint which you are seeking to file raise claims that have been presented					
6						
7	7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in					
8	which they were filed.					
9	CEE INDIT					
10						
1:1	I consent to prison officials withdrawing from my trust account and paying to the court					
12	the initial partial filing fee and all installment payments required by the court.					
13	I declare under the penalty of perjury that the foregoing is true and correct and					
14	understand that a false statement herein may result in the dismissal of my claims.					
15	2010					
16	5-20108 Sont Conte (220m)					
17	DATE SIGNATURE OF APPLICANT					
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28	·					
- 1						

	·
1	
2	Case Number:
3	
4	
5	
6	
7	
8	CERTIFICATE OF FUNDS
9 .	IN
10	PRISONER'S ACCOUNT
11	
12	I certify that attached hereto is a true and correct copy of the prisoner's trust account
13	statement showing transactions of Jam Scaf for the last six months
14	Tolson State Possic where (s)he is confined.
15	[name of institution] I further certify that the average deposits each month to this prisoner's account for the
16	most recent 6-month period were \$ -10.00 and the average balance in the prisoner's
17	account each month for the most recent 6-month period was \$ - 10.00.
18	
19	Dated: 5/22/08 [Authorized officer of the institution]
20	[Authorized officer of the insulation]
21	Pia chill I
22	Ole allacted Tring account
23	butaine sheet
24	
25	
26	
27	
28	

Case 3:08-cv-02259-WHA Document 4 Filed 05/29/2008 Page 6 of 8 CALIFORNIA DEPARTMENT OF CORRECTIONS TS210B ITAS TRUST ACCOUNT DISPLAY ----- ACCOUNT INFORMATION ------ SPECIAL ITEMS -----ACCOUNT NUMBER: V59334 ACCOUNT NAME: GRAY, SAM DONTE ACCOUNT TYPE: I 20.97 CURRENT BALANCE: HOLD BALANCE: 0.00 ENCUM. BALANCE: 0.00 20.97 AVAILABLE: PRIVILEGE GROUP: Α LAST CANTEEN: 05/20/2008 -----TS210CA DATE TRAN AMOUNT DESCRIPTION CHECK NUM COMMENT BALANCE ---- --- ---- -----4.94 INMATE PAYROLL-4.94 01/04/08 VD54 701847/DEC 702198/JAN 7.78 02/04/08 VD54 2.84 INMATE PAYROLL-02/04/08 VD54 7.02 INMATE PAYROLL-702198/JAN 14.80 5.00 CASH WITHDRAWAL 205-044383 02/20/08 W415 702398C/WD 9.80 PAGE# 2 OF 2 PAGES

TS210B CALIFORNIA DEPARTMENT OF CORRECTIONS
, ITAS TRUST ACCOUNT DISPLAY

2 PAGES

1 OF

PAGE#

	ACCOUNT IN	FORMATION			- SPECIAL	ITEMS	
ACCOUNT NUMBER:	V59334						
ACCOUNT NAME:	GRAY, SAN	1 DONTE					
ACCOUNT TYPE:	I						
CURRENT BALANCE:	20.9	97					
HOLD BALANCE:	0.0	00					
ENCUM. BALANCE:	0.0	0					
AVAILABLE:	20.9	7					
PRIVILEGE GROUP:	A						
LAST CANTEEN:	05/20/200	8					
		ACCOUNT TRAN	SACTIONS				TS210CA
DATE TRAN	AMOUNT	DESCRIPTION	N CHECK	NUM	COMMENT	BA	LANCE
03/04/08 VD54	2.74	INMATE PAYRO	LL-		70252 <mark>6/FE</mark>	3	12.54
04/03/08 VD54	8.13	INMATE PAYRO	LL-		702926/MAF	3	20.67
04/15/08 FC03	20.67	DRAW-FAC 3			703052CFAC		0.00
05/02/08 VD54	10.70	INMATE PAYRO	LL-		703271/APF	₹	10.70
05/20/08 FR01	20.67-	CANTEEN RETU	RN		703466		31.37
05/20/08 FC03	10.40	DRAW-FAC 3		,	703477CFAC		20.97